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FEC FORM 1	STATEMENT OF ORGANIZATION						Office Use Only					
1. NAME OF COMMITTEE (in	n full)	(Check if na is changed)		xample:If ty ver the line:		12F	E4M5					
Barrick Go	ld of N	orth Ameri	ca Inc.	Empl	oyees	PAF						Ш
ADDRESS (number a	nd street)	136 E. South Templ	e St. Ste. 130	0								
(Check if address is changed)		Salt Lake City				UT		84111] - [_		
		CITY					STATE			ZIP CODE		
COMMITTEE'S E-MA	AL ADDRES		-	address)								
X (Check if is change		fecinfo@pass1.con	n 									
COMMITTEE'S WEB (Check if is change)	address	RESS (URL)										
2. DATE 12	M / D D	2011										
3. FEC IDENTIFIC	CATION NUI	MBER	C C00320	580								
4. IS THIS STATEM	MENT	NEW (N)	OR	× AM	ENDED (A)							
I certify that I have e	examined this	s Statement and to t	the best of my	y knowledg	e and belie	f it is true,	correct	and co	mplete.			
Type or Print Name	of Treasurer	Be-Be Adams										
Signature of Treasure	Be-Be Ad	lams		[Electroi	nically Filed]	Date	12	′ [01	Y	y y 2011	Y
NOTE: Submission of		ous, or incomplete info						the pen	alties of	f 2 U.S	i.C. §4	37g.
0#:			<u> </u>	Fac food	luf							

l U:	ice se nly				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	
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